Mississippi Amended Corporate Income and Franchise Tax Return ORIGINAL RETURN MUST BE ATTACHED

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	Corpo	oration [Corpo		Ш 	.	Page
For Calendar Year Ending		Or For Fisca	al Year Begini	ning		and	Ending		
Name			Telepho	ne		Federa	al I. D. N	Number	
Mailing Address									
Mailing Address									
City	State	Zip +4	County	Code					_
						[For interna	al use	only Collec. Co	de <u>2</u>
Check here if the name or a	address s	hown above is d	lifferent from	that	shown or	the origina	return	ı.	
Franchise and Income		Originally Reported		В.	Net Change	- Increase/Decre	ase	C. Cor	rect Amount
Тах	О	r as Adjusted	(Indicate Decre	ease by	Marking Nega	tive Indicator - Ex	olain on Pa		Cot / timodift
1.Taxable Capital									
2. Franchise Tax			(1)▶						
MS Net Taxable Income			」						
4. Total Income Tax			(2)▶						
5. Ad Valorem Tax Credit			(4)						
6. Other Credits									
7. Balance of Income Tax Due (Line less Lines 5 and 6).	4		1						
8. Total Franchise & Income Tax Due (Line 2 plus Line 7).	e								
Overpayments from Prior Years as of Estimated Tax Payments and Amou. Amount Paid with Original Return, PInterest & Penalty on Underpayments amount.) Total Payments (Add Lines 9 throug Overpayment, if any, Shown on Originamount of overpayment on the originated tax or refunded.) Net Tax Paid for This Tax Period (S. TAX DUE (If Line 8C is more than L. Interest @ 1% PER MONTH of Tax. Penalty @ 1/2% PER MONTH (not to e. AMOUNT PAID WITH RETURN (A. OVERPAYMENT (If Line 8C is less. Amount of Overpayment (Line 19)	unt Paid W Plus Additic ent of Est gh 11.) ginal Retur riginal retu Subtract Li Line 14, er x Due (line exceed 25% add Lines 1	ith Extension conal Tax Paid After imated Tax or Int rn (or as previously urn BEFORE any ne 13 from Line 12 nter the difference. e 15) from Original 6) of Tax Due (line 1 15, 16 and 17). Att 14, enter the diffe	/ adjusted) portion there 2.) (This Amou) Due Date of 5) from Originatach Check or	(NOTI eof wa unt Sho Return	E: Enter tiss applied puld Agree until Paid	ments in he to with Line 8A urn until Paid	(7) (8) 0 (9)		
Amount of Overpayment (Line 19)			ar (See instru	ctions	on page 2		(10)		
HIS RETURN MUST BE SIGNED. Ur atements, and to the best of my knowl	nder penal ledge and		eclare that I ha ect, and comp	ave ex olete.	amined thi		(companying sche	dules and
_									
Paid Preparer Signature		Date					Paid	Preparer Address	
		Date					Paid (Preparer Address	

Form 83-170-03-8-2-000 (Rev. 08/03)

Mississippi Amended Corporate Income and Franchise Tax Return

Page 2

☐ Ye	s No Has the origin	al return been changed or audited	by either	the IRS or MSTC, or have you been notified that it will be?				
Check Appropriate Correction only Correction only Amended Federal Form 1120X or Form 1139 (attach copy) Federal RAR (attach applicable copies) Other:								
				-				
CODE	CREI	DITS	CODE	CREDITS				
02	Premium Retalitory Tax Credit (Sec.	27-15-121)	10	Reforestation Credit (Sec. 27-7-22.15)				
03	Finance Company Privilege Tax Paid	for Same Tax Year (Sec. 27-21-9)	11	Credit for Gambling License Fee Based on Gross Revenue (Sec. 75-76-177)				
04	Credit for Advanced Technology or Enterprise Zone (Sec. 27-7-22)			Financial Institution Jobs Credit (Sec. 27-7-22.13)				
05	Jobs Tax Credit (Sec. 57-73-21)			MS Business Finance Corp. Revenue Bond Service Credit (Sec. 27-7-22.3)				
06	National or Regional Headquarters Credit (Sec. 57-73-21)			Export Port Charges Credit (Sec. 27-7-22.7)				
07	07 Research and Development Skills Credit (Sec. 57-73-21)			Guaranty Credit (Sec. 83-23-218)				
08 Child/Dependent Care Credit (Sec. 57-73-23)			18	Land Donation Credit (House Bill 701 - 2003 Legislative Session)				
09	Basic Skills Training or Retraining Credit (Sec. 57-73-25)			Broadband Technology Credit (Senate Bill 2979 - 2003 Legislative Session)				
Credits	s (Other Than Ad Valoren	n) (Enter the amount and a	pplica	ble code below).				
1. Amou	nt of Credit Claimed			Credit Code from Table				
2. Amou	nt of Credit Claimed			Credit Code from Table				
3. Amou	nt of Credit Claimed			Credit Code from Table				
4. Amou	nt of Credit Claimed			Credit Code from Table				
	ther Credits (Add lines 1 through 4 er total on line 6 of page 1).							

Explanation of Changes to Income, Deductions, and/or Credits on Page 1

Enter the line number from Page 1 for the items you are changing, and give the reason for each change. Show any computations in detail. Attach any forms/schedules as necessary to explain changes. **Please attach a copy of the original return filed.**

Overpayments that are not refunded will be applied to the next period for which the corporation makes a filing.

Example 1: ABC submits an amended return for tax years ending December 1999 and October 2000 (short period). ABC's amended 1999 return shows a reduced tax liability of \$100.00 and an overpayment to next year of \$100.00. ABC's amended 2000 return shows an additional tax liability of \$75.00. ABC includes the \$100 overpayment from prior year on line 11 and claims a refund of \$25.00.

Example 2: ABC submits an amended return in January 2002 for tax year ending December 1999 showing a reduced tax liability of \$100.00 and a corresponding overpayment to the next year of \$100.00. ABC's next return filing, in March 2002, is an original return for the year ending 2002. The \$100.00 overpayment from 1999 is included on the 2002 return as a part of the overpayments from prior years.